FORM D

34884

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D©020549

FORM D



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Num		3235-0076					
Expires:	April	30,2008					
Expires: April 30,2008 Estimated average burden							
hours per r	espon	se[[[[[]]] 6[[]]0					

SEC USE ONLY								
Prefix	Serial							
DATE RE	CEIVED							
	1							

Name of Offering (check if this is an amendment and name has changed, and indicate changed) FEDORAL MUNTGACE CURPURATION OF PUERTU RICO PRIVATE	PLANNER 7 #1
Filing Under (Check box(es) that apply):	VIOE REGION
Type of Filing: New Filing Amendment	OCY TO THE
ACBASIC IDENTIFICATION DATA	2005
1 Enter the information requested about the issuer	6
Name of Issuer (check if this is an amendment and name has changed, and indicate changed)	19/3/3 TION
FEDERAL MORTGABE CURPURATION OF PUBLICO	SECH
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
444 DARK FUREST WAY, WELLINGTON FL 3341X	561-198-4294
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) .	
Brief Description of Business	
MORTGAGE LENDING	DDAGEGO
	PROCESSED
Type of Business Organization	007.0
	lease specify): OCT 2 8 2005
business trust limited partnership, to be formed	- Indian
Month Year	7 FINANCIA
Actual or Estimated Date of Incorporation or Organization: Actual Estim Estim Jurisdiction of Incorporation or Organization: (Enter two-letter US Postal Service abbreviation for State:	
CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230⊡01 et seq⊕r 15 U⊠©□ 77d(6)□

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering A notice is deemed filed with the US Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address

Where To File: US□Securities and Exchange Commission, 450 Fifth Street, NtW Washington, Dtc 20549 □

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures

Information Required: A new filing must contain all information requested Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B Part E and the Appendix need not be filed with the SEC

Filing Fee: There is no federal filing fee [

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form This notice shall be filed in the appropriate states in accordance with state law The Appendix to the notice constitutes a part of this notice and must be completed

Failure to file notice in the appropriate states will not result in a loss of the federal exemption Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice

2□ Enter the information requested for the	he following			
• Each promoter of the issuer, if t		within the past five years:		
<u>-</u>			of, 10% or more of a	a class of equity securities of the issue
Each executive officer and direct				
Each general and managing part				
				
Check Box(es) that Apply: Promo	بدعي	Executive Officer	Director	General and/or Managing Partner
MICHAEL L. SCHUMACHE				
Full Name (Last name first, if individual)		00011		
2525 15th St # 3H				
Business or Residence Address (Number	r and Street, City, State, Zip C	ode)		
Check Box(es) that Apply: Promo	oter Beneficial Owner	Executive Officer	Director	General and/or
	dei Denement owner	DA DAGGETTE GITTEET	Director	Managing Partner
PETER J. PONATH Full Name (Last name first, if individual)				
HILL DARY FURES	T way, we	LLINGTON F	-L 33414	
Business or Residence Address (Number			- 33/17	· · · · · · · · · · · · · · · · · · ·
Dusiness of Residence (Idaness (Idaness	and survey, easy, states, asp e			
Check Box(es) that Apply: Promo	ter Beneficial Owner	Executive Officer	Director	General and/or
GEORGE A POWELL		,	/-	Managing Partner
Full Name (Last name first, if individual)				
7209 S. GARLAN	1) COURT	I TO ETUS)	00 80	1/2 C
Business or Residence Address (Number	r and Street, City, State, Zip C	ode)	200	7
v				
Check Box(es) that Apply: Promot	ter Beneficial Owner	Executive Officer	Director	General and/or
				Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number	and Street, City, State, Zip Co	ode)		
Check Box(es) that Apply: Promot	ter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Pull Mark (france)	· · · · · · · · · · · · · · · · · · ·			ividiaging I artifet
Full Name (Last name first, if individual)	. •			
Business or Besidence Address - Alumbar	and Street City State 7:- C			
Business or Residence Address (Number	and Street, City, State, Zip Co	ode)		
Check Box(es) that Apply: Promot	ter Beneficial Owner	Executive Officer	Director	☐ Company 1/2
Tromot	Delicitation Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
in the control of the				
Business or Residence Address (Number	and Street, City, State, Zip Co	ode)	-	
		,,,,,		
Check Box(es) that Apply: Promote	er Beneficial Owner	Executive Officer	Director	General and/or
_				Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number	and Street, City, State, Zip Co	ide)		

1□ Has th	a iccuar col	d or does t	he iccuer i	ntend to	sell, to non-	accredited	investors	in this offe	ring? IIIIIII	amannana	Yes	No
10 1103 111	10 133401 3010	1, 01 0005 1			in Appendix				_			_
2 What	is the minim	ıum investr			cepted from						<u>ئ</u> \$ س	5.00
		.,			1 :40 m						Yes	No
	-				ngle unit? Ш who has be						, .	旦
commi If a per or state	ission or sim rson to be lis es, list the na	ilar remune ted is an as ame of the b	eration for a sociated pe proker or d	solicitatio erson or a ealer□If r	on of purchas gent of a bro more than fiv ation for that	sers in conn ker or deale ve (5) perso	ection wi er register ns to be li	th sales of se red with the isted are asso	ecurities in SEC and/o	the offering r with a sta	g□ .te	
Full Name	(Last name	first, if ind	ividual)	No	Commi		ur	SIMIL	gn K	CMUN .	ERAT.	سررز
Business or	r Residence	Address (N	lumber and	d Street,	City, State, 2	Zip Code)						
Name of A	ssociated Br	oker or De	aler		• . •							
States in W	hich Person	Listed Ha	s Solicited	or Intend	ds to Solicit	Purchasers						
(Check	k "All States	" or check	individua	l States) [<u> </u>	<u> </u>	□	ll States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
							(VA)	WA		VV 1		(LK)
Full Name	(Last name f	first, if indi	ividual)									
Business o	r Residence	Address (1	Yumber an	d Street,	City, State,	Zip Code)			· · · · · · · · · · · · · · · · · · ·			
Name of As	ssociated Bro	oker or De	aler			_			-			
					is to Solicit							
(Check	"All States"	or check	individual	States) [<u> </u>				<u> Turinentiinennul</u>	□	1 States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS	MO
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	OR WY	PA PR
Full Name (Last name f	irst, if indi	vidual)	· · · · · ·		_	······································					
Pusiness or	- Dasidanaa	Address ()		J C4 4	City, State, 2	71 0 1						
	Residence	Audiess (N	umber and	ı Sireei, (Jily, State, 2	Lip Code)						
Name of As:	sociated Bro	ker or Dea	ler									
States in Wh	nich Person	Listed Has	Solicited	or Intend	s to Solicit F	urchasers	· · · · · · · · · · · · · · · · · · ·					
(Check	"All States"	or check i	ndividual	States) [[Шин	D 🗌 All	States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
IL MT	IN]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA

10	sold Enter "0" if the answer is "none" or "zero! If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt diffiliation and the control of		\$
	Equity (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIIII) (IIIII) (IIIII) (IIIII) (IIIII) (IIIIII) (IIIII) (IIIII) (IIIII) (IIIII) (IIIII) (IIIII) (IIIII) (IIIIII) (IIIII) (IIIIII) (IIIII) (IIIII) (IIIII) (IIIII) (IIIIII) (IIIIII) (IIIII) (IIIII) (IIIII) (IIIIIIII	3140	\$ 3 140
	Common Preferred		
	Convertible Securities (including warrants)	· · · · · · · · · · · · · · · · · · ·	\$
	Partnership Interests @@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@		\$
	Other (Specify)		\$
	Total diminimization in the state of the sta	D003/40	\$ 0.00 3140
	Answer also in Appendix, Column 3, if filing under ULOE□		
20	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases of the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines of their purchases on the total lines of their purchases on the total lines.		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors (IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	35	\$ 3140
	Total (for filings under Rule 504 only)	35	s 3140
	Answer also in Appendix, Column 4, if filing under ULOE□		
3 🗆	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering \Box Classify securities by type listed in Part C — Question $1\Box$	·	
	Type of Offering	Type of	Dollar Amount
	Type of Offering Rule 505	Security	Sold
	Rule 505		\$
	Rule 504		\$
	Total	0.00	\$ \$ 0.00
4	a Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate		<u></u>
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees (IIIII)		\$
	Accounting Fees		\$
	Engineering Fees (IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
			s 0.00

	b□ Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4屆□This difference is the "adjusted gross proceeds to the issuer □ □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□		3140 s_0.00
50	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4th above		
		Payments to	
		Officers, Directors, &	Payments to
		Affiliates	Others
	Salaries and fees designation of the salaries an	\$	\$
	Purchase of real estate differential and the state differential and the sta	\$	\$
	Purchase, rental or leasing and installation of machinery		
	and equipment		
	Construction or leasing of plant buildings and facilities	\$	\$
	Acquisition of other businesses (including the value of securities involved in this		
	offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	\$	
	Repayment of indebtedness IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		
	Working capital @@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@		☐ \$
	Other (specify):	\$	
		\$	\(\) \$
	Column Totals (IIIIII) (IIIII) (IIIII) (IIIII) (IIIII) (IIIIIII) (IIIIIII) (IIIIIIII	\$ 0.00	\$ 0.00
		·	_
	Total Payments Listed (column totals added)	\$ <u></u> \$	
The cian	issuer has duly caused this notice to be signed by the undersigned duly authorized person If this notice is ature constitutes an undertaking by the issuer to furnish to the UB Escurities and Exchange Commission	s filed under Rul	e 505, the following
	information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Ru		request of its starr,
ssu	er (Print or Type) FEDERAL MUNTIALE STERRINGE/	te	
	PURATION OF PUBLIN PICO Allerhal J. Inlumber	10-15-	⁻ رن
	ne of Signer (Print or Type) Title of Signer (Print or Type)		
	MEMBE L. SCHUMACHEN PRESIDENT		
	11		
			1

Intentional misstatements or omissions of fact constitute federal criminal violations[] (See 18 U[S[C]1001]]

1 🗆	Is any party described in 17 CFR 230/262 presently subject to any of the disqualification	Yes	No
	provisions of such rule? @		N°.

See Appendix, Column 5, for state response□

- 2□ The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239©300) at such times as required by state law□
- 3 The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees
- 4 The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person

Issuer (Print or Type) FEDERAL MAR CURPUN ATION UP DUBITS	PICO Medael Minuke 10-15-05	
Name (Print or Type)	Title (Print or Type)	
MICHAEL L. SCHUMACH	be Phesipary	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form One copy of every notice on Form D must be manually signed Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures

1.	Intend to non-a investor:	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	i	amount pu	4 investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR			. After						
CA			50,00			/	5,00		U
СО				:					
СТ									
DE									
DC									
FL	V		COMMON STOCK			9	2492.00		
GA						/			
HI		·							
ID									
IL									
IN			Stock 5.00		٠		5.00		
IA									
KS									
KY									
LA									
ME									
MD									
MA			Duga to wind Wood						
MI			50,00		<u></u>	2	50.W		
MN			Common State Sous Common State 484.00	`		20	484,00		
MS							·		

					,				
1	to non-a	to sell coredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	,	amount pu	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT									
NE									
NV									
NH									
NJ			Lummud Stoye 73, 22 Lummin Stou 5,00			/	23.00		
NM				<i>(</i>					
NY			500				5.W		
NC									
ND									
ОН									
ОК			//						
OR			Cummyd StxIC			/	5.00		
PA									
RI									
SC									
SD									
TN							·		
TX									
UT									
VT				·					
VA			Cummid Hoo			/	23.00		
WA									
wv									
WI			Cummon Stade 5.00	,	. 7	/	5.00		

1		2	3		4				
	to non-a	d to sell accredited es in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				amount purchased in State waiver grant	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									